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ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	JA		8/3/01
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		48	8/13/01
FORMALITY REVIEW	AK	539	9/11/01
RESPONSE FORMALITY REVIEW	H.L.	1049	01/10/02

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 (Through numeral)..... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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